

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
	BW	04870	12-4

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INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
- (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	Original
1	11-20-01
2	10-11-01
3	10-11-01
4	10-11-01
5	10-11-01
6	10-11-01
7	10-11-01
8	10-11-01
9	10-11-01
10	10-11-01
11	10-11-01
12	10-11-01
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14	10-11-01
15	10-11-01
16	10-11-01
17	10-11-01
18	10-11-01
19	10-11-01
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Claim	Date
Final	Original
51	10-11-01
52	10-11-01
53	10-11-01
54	10-11-01
55	10-11-01
56	10-11-01
57	10-11-01
58	10-11-01
59	10-11-01
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61	10-11-01
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Claim	Date
Final	Original
101	10-11-01
102	10-11-01
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If more than 150 claims or 10 actions
staple additional sheet here

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INDEX OF CLAIMS

CLAIM	DATE	CLAIM	DATE	CLAIM	DATE
FINAL	ORIGINAL	FINAL	ORIGINAL	FINAL	ORIGINAL
161		201		251	
162		202		252	
163		203		253	
164	✓	204		254	
165		205		255	
166		206		256	
167		207		257	
168		208		258	
159		209		259	
160		210		260	
161		211		261	
162		212		262	
163		213		263	
164		214		264	
165		215		265	
166		216		266	
167		217		267	
168		218		268	
169		219		269	
170		220		270	
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172		222		272	
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197		247		297	
198		248		298	
199		249		299	
200		250		300	